Time & Dates 8:30 AM-4:00 PM

Thurs. April 9, 2015 Fri. April 10, 2015 Thurs. May 14, 2015 Thurs. Sept. 17, 2015 Fri. Sept. 18, 2015 Fri. Oct. 23, 2015



2015: A Plan of Action: Bioterrorism Preparedness for Clinical Labs

Check Your Skill Level with a Hands-On Lab Experience!

Presented at the Tennessee Department of Health: Division of Laboratory Services in Nashville, Tennessee

Course Description:

This program focuses on practical methods that clinical laboratories can use to remain alert for the agents of bioterrorism. Participants will learn about surveillance and evaluation procedures that can be integrated into the routine work of the microbiology lab.

Procedures for the referral of suspect cases will also be discussed. In this hands-on course, following appropriate safety precautions, participants will examine actual cultures and organisms in a laboratory setting. Admission preference is given to MTs and MLTs who work in microbiology laboratories in Tennessee.

Brought to you at NO
CHARGE through the
Public Health Emergency
Preparedness Grant

Course Objectives

By the end of the program, participants will be able to:

- Discuss the role of the clinical lab in discovering organisms targeted for use in acts of bioterrorism.
- Explain the safety implications of handling suspected organisms in clinical specimens and isolates.
- Describe the clinical and laboratory features of the primary agents likely to be involved in a bioterrorist event, including anthrax, plague, botulism, tularemia, brucellosis, melioidosis and glanders.
- Recognize culture, staining and biochemical characteristics of bioterrorist organisms.
- Apply information presented in clinical scenarios in order to avoid identification pitfalls.
- Introduction to select agent regulations and their impact on clinical laboratories

6.5 Contact Hours of Continuing Education Credits for State Licensure Requirements



Tennessee Department of Health Division of Laboratory Services

630 Hart Lane

Nashville, TN 37243 Phone: 615-262-6318 Fax: 615-262-6360



<u>Please Note:</u> Your e-mail address is what we use to track your application and participation in

the workshop. Be sure to use the same e-mail address in all forms relating to your workshop participation. This e-mail will also be our primary means of communication with you. If you do not have an e-mail address, please provide a telephone number at which you may be reached during weekday business hours. Please provide the requested information, fill out the application clearly and mail or fax to the information above. You may also e-mail the scanned form to: labworkshopapps.health@tn.gov

Applicant Information

*Required Fields—please print

*Name (First & Last):			*E-Mail Address:		
Facility Name (Please Spell Out):			*Daytime Phone:		
Facility Address:			Fax Number:		
Number	mber Street Suite #		*What are your job duties and what laboratory area do you work in?		
City	State	Zip Code	*MT/MLT TN State License Number:		
Select One Date from the Classes Below:					
Thursday	Friday	Thursday	Thursday	Friday	Friday
April 9	April 10	May 14	September 17	September 18	October 23